## Certificate of Relationships and Nonprofit Motives

(See Note at bottom of page)

U.S. Department of Housing and Urban Development Office of Housing Federal Housing Commissioner OMB Approval No. 2502-0057 (exp. 11/30/97)

**Public reporting burden** for this collection of information is estimated to average 0.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Paperwork Reduction Project (2502-0057), Office of Information Technology, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collecton displays a valid OMB control number.

## Do not send this form to the above address.

**Privacy Act Statement.** The Department of Housing & Urban Development (HUD) is authorized to collect all the information on this form by the U.S. Housing Act of 1937, as amended, and by the Housing & Community Development Act of 1987, 42 U.S.C 3543 which authorizes HUD to collect Social Security Numbers (SSN). The information you provide will be reviewed to ensure that the motives of the nonprofit sponsor and the mortgagor have not changed since the application stage and that no relationships exists which violate the intent of outstanding regulations. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as required and permitted by law. You must provide all of the information requested in this application, including your SSN or EIN. Failure to provide the information may result in your disapproval of participation in this HUD program and/or delay action on your proposal.

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TO: U.S. Department of Housing and Urban Development		Project Nu	Project Number:	
c/o				
		Project Na	me:	
In accordance with the terms of the commitment issued by y the note for insurance, the undersigned hereby certifies all			e above named project, and in order to induce you to endorse	
Name of mortgagor corporation or association	Date charter received	Authorizing State	Authorizing statute	
The officers and directors are (Name and Title)		curity Number/	Address	
We have reviewed the information cumplied to your	on form HIID 2/22	Noted	, and the exhibits accompanying that form	
We have reviewed the information supplied to you and certify that there have been no changes in that			the exhibit attached hereto and made a part thereof.	
	ere are any changes	in the information	on contained in the exhibit attached to this certificate contained in this certificate prior to completion of the courred.	
Name, title, signature & date for mortgagor corporation or associa	ation: N	lame, title, signature & d	late for sponsor:	

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)